

LAND DISPOSAL INSPECTION REPORT

Disposal Facility <i>Barkman Landfill</i>	Facility Address <i>RD#1 Honeybrook</i>
County <i>Chester</i>	Municipality <i>Honeybrook Township</i>
Proprietor's Name <i>Ernest Barkman</i>	Proprietor's Address <i>Same as above</i>

CC

Type Record ☐ 6 1Identification Number ☐ 100812 2-7Inspection Date ☐ MO 08 ☐ DA 18 ☐ YR 71 8-13Reinspection Date ☐ MO 08 ☐ DA 26 ☐ YR 71 14-19

	CMPL 1	N-CMPL 2	N/A 3	
1. ALL WEATHER ACCESS ROADS TO THE SITE FOR TWO-WAY TRAFFIC OR SEPARATE ROADS FOR ONE-WAY TRAFFIC NEGOTIABLE BY LOADED COLLECTION VEHICLES.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	20
2. TELEPHONE OR RADIO COMMUNICATIONS ACCESSIBLE TO THE SITE.	<input type="checkbox"/>	<input type="checkbox"/>		21
3. ADEQUATE EQUIPMENT FOR MINIMIZING FIRE HAZARDS AVAILABLE.	<input type="checkbox"/>	<input type="checkbox"/>		22
4. ALL BUILDINGS AND EQUIPMENT PROVIDED WITH FUNCTIONAL FIRE EXTINGUISHERS.	<input type="checkbox"/>	<input type="checkbox"/>		23
5. ACCESS LIMITED TO THOSE TIMES WHEN AN ATTENDANT IS ON DUTY.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		24
A. HOURS OF OPERATION PROMINENTLY POSTED.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		25
B. SUITABLE BARRIER AND FENCING BLOCKS ACCESS TO THE SITE WHEN AN ATTENDANT IS NOT ON DUTY.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		26
6. APPROVED OPERATIONAL SAFETY PROGRAM FOLLOWED AT SITE.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		27
7. ADEQUATE SANITARY FACILITIES PROVIDED FOR THE EMPLOYEES.	<input type="checkbox"/>	<input type="checkbox"/>		28
8. MAINTENANCE OF DAILY OPERATIONAL RECORDS.	<input type="checkbox"/>	<input type="checkbox"/>		29
9. FOLLOWING OPERATIONAL PLAN ITEMS FOLLOWED AT SITE:				
A. AREA TO BE FILLED	<input type="checkbox"/>	<input checked="" type="checkbox"/>		30
B. SCHEDULE OF FILLING	<input type="checkbox"/>	<input checked="" type="checkbox"/>		31
C. SITE PREPARATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>		32
D. SOURCE AND TYPES OF COVER MATERIAL	<input type="checkbox"/>	<input checked="" type="checkbox"/>		33
E. SOURCE AND TYPES OF SUB-BASE	<input type="checkbox"/>	<input type="checkbox"/>		34

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	CMPL 1	N-CMPL 2	N/A 3	
10. EQUIPMENT PROVIDED FOR OPERATION OF THE SITE ADEQUATE IN SIZE AND PERFORMANCE CAPABILITY.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
11. PROVISIONS AVAILABLE TO WEIGH AND/OR MEASURE ALL SOLID WASTE DELIVERED TO THE SITE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	36
12. UNLOADING AREAS CLEARLY INDICATED AND RESTRICTED TO WITHIN THIRTY FEET OF THE WORKING FACE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	37
13. SIZE OF THE WORKING FACE CONFINED TO AN AREA WHICH CAN EASILY BE COMPACTED AND COVERED DAILY.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	38
14. BLOWING LITTER CONTROLLED.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		39
15. SOLID WASTE SPREAD AND COMPACTED IN LAYERS NOT EXCEEDING A DEPTH OF TWO FEET.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	40
16. INDIVIDUAL CELLS EIGHT FEET THICK OR LESS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	41
17. UNIFORM LAYER OF COVER MATERIAL, COMPACTED TO A MINIMUM OF SIX INCHES, PLACED ON ALL EXPOSED SOLID WASTE AT THE END OF EACH WORKING DAY.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	42
18. AN INTERMEDIATE LAYER OF COVER MATERIAL, COMPACTED TO A MINIMUM UNIFORM DEPTH OF ONE FOOT, PLACED ON COMPLETED LIFTS IN AREAS WHERE THERE IS CLEAR INTENTION TO PLACE ANOTHER LIFT WITHIN ONE YEAR.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	43
19. A FINAL LAYER OF COVER MATERIAL, COMPACTED TO A MINIMUM UNIFORM DEPTH OF TWO FEET PLACED OVER THE ENTIRE SURFACE OF EACH PORTION OF THE FINAL LIFT.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	44
20. SUITABLE STANDBY EQUIPMENT AVAILABLE TO THE SITE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		45
21. DISPOSAL OF SEWAGE SOLIDS, LIQUIDS AND HAZARDOUS WASTE HANDLED WITH THE APPROVAL OF THE DEPARTMENT OF ENVIRONMENTAL RESOURCES.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	46
22. BULKY WASTES PROPERLY DISPOSED.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	47
23. REGULATION BAN ON OPEN BURNING ADHERED TO AT THE SITE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		48
24. DUST CONTROLLED AT SITE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		49
25. REGULATION BAN ON SCAVENGING ADHERED TO AT THE SITE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		50
26. SALVAGING AT SITE OCCURS IN ACCORDANCE WITH REGULATIONS.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	51
27. SURFACE WATER IS SATISFACTORILY MANAGED AT THE SITE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		52
28. FINAL SLOPES AT LEAST ONE PERCENT BUT NOT GREATER THAN FIFTEEN PERCENT OR AS APPROVED BY THE DEPARTMENT OF ENVIRONMENTAL RESOURCES.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	53
29. SATISFACTORY VEGETATIVE GROWTH ESTABLISHED TO PREVENT EROSION OF THE FINAL SOIL COVER (Weather Permitting).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	54
30. REGULATION BAN ON UNTREATED LEACHATE DISCHARGE TO SURFACE ADHERED TO AT SITE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
31. LEACHATE TREATMENT FACILITIES OPERATED SATISFACTORILY AT SITE.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	56
32. AN EFFECTIVE VECTOR CONTROL PROGRAM UTILIZED AT SITE (Where Needed).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	57

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YES

1

NO

2

☐☒

ARE HAZARDOUS WASTES RECEIVED AT THE SITE?
(If Yes, List Types on Next Page.)

CORRECTIVE PRIORITY PROGRAM:

The following items are not in compliance at the time of inspection. Please refer to those sections and page numbers of the regulations (enclosed) for explanation of the requirements.

Items

1) - Section 6 B 3 p. 13

5A - }
5B - } Section 6A 5 p. 9

6 and 9A-9D - Section 5 A-G pages 6-7,
and Section 6B(1) a-e pages 11-13

17 - Section 6B10 p. 15

22 - Section 6B15 p. 16

26 - Section 6A 7 p. 10

George V. Buchanan
SANITARIAN (Signature)

OPERATOR (Signature)

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Card Code **A**Page 4
CC
1Identification Number **100712**

2-7

Inspection Date **08 18 71**

8-13

1. PER DAY
2. PER WEEK
3. PER MO.
4. PER YEAR

TYPES OF SOLID WASTE RECEIVED

A. AGRICULTURAL WASTE

YES
1NO
2

TONS

☐☒☐☐

14-21

B. COMMERCIAL WASTE

☐☒☐☐

22-29

C. CONSTRUCTION AND DEMOLITION WASTE

☐☒☐☐

30-37

D. DOMESTIC AND HOUSEHOLD WASTE

☒☐☒☒

38-45

E. INDUSTRIAL WASTE

☐☒☐☐

46-53

F. PARK AND BEACH WASTE

☐☒☐☐

54-61

Card Code

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1

G. PATIENT CARE INSTITUTION WASTE

☐☒☐☐

14-21

H. SEPTIC TANK WASTE

☐☒☐☐

22-29

I. SEWAGE TREATMENT PLANT AND PUMPING STATION WASTE

☐☒☐☐

30-37

J. STREET AND ALLEY WASTE

☐☒☐☐

38-45

K. TREE AND LANDSCAPING WASTE

☐☒☐☐

46-53

L. OTHER

☐☒☐☐

54-61

STATE QUANTITIES OF SOLID WASTE RECEIVED PER DAY

☒

62-70

Card Code

☒

1

LIST TYPES OF HAZARDOUS WASTE

CODE

TONS

☐☐☐

14-24

☐☐☐

25-35

☐☐☐

36-46

☐☐☐

47-57

☐☐☐

58-68

Card Code

☒

1

CODE

TONS

☐☐☐

14-24

☐☐☐

25-35

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36-46

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47-57

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58-68

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